



CLMSENCL0020

**DECLARATION**  
(UNAUTHORIZED REMOTELY CREATED CHECK)

**I swear and state under penalties of perjury** that the remotely created check identified below (the "Checks" whether one or more) were not authorized and:

1) I am (check one):

☐ the owner    ☐ the \_\_\_\_\_ (title) of \_\_\_\_\_ (entity name), which is the owner, ("Customer") of the following account ("Account") at JPMorgan Chase Bank, N.A. ("Chase"):

Customer Name on Account: \_\_\_\_\_

Account Number: \_\_\_\_\_

2) Each of the checks described below is a "remotely created check," i.e., a check that was not created by the paying bank and that does not bear a signature applied or purported to be applied by the Customer.

Check number (if any):      Date:      Amount:      Payee name:

\_\_\_\_\_  
\_\_\_\_\_

3) Please indicate type/reason the checks were not authorized:

- ☐ Customer did not authorize the checks **in the payee name stated on the checks.**  
☐ Customer did not authorize the checks **in the amounts stated on the checks.**

4) If the person or entity that created the checks is known to you, indicate the relationship and provide any information you may have about this person or entity, including name, address and telephone number.

\_\_\_\_\_  
\_\_\_\_\_

I understand that making a false sworn statement is subject to federal and/or state statutes and may be punishable by fines and/or by imprisonment. Chase may require further information concerning this matter, which I agree to provide. I also understand that Chase or other persons or entities, such as law enforcement, may require my assistance in connection with any criminal or civil prosecution of the wrongdoer(s). Should that arise, I agree to cooperate fully, including the giving of testimony and appearing at a trial. Should I refuse to cooperate, Chase may revoke any payment to Customer, including charging the amount of any payment to any account of the Customer.

**SWORN TO AND EXECUTED ON** this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
If Customer is a Business/Title of Authorized Signer

Please keep a copy for your records and mail or fax the following information to the address or number below:

JPMorgan Chase Bank, N.A.  
Customer Claims Department  
Attn: OH1-1039  
1111 Polaris Pkwy  
Columbus, OH 43240-2050  
1-866-661-4125 (Fax)